

New HealthChoice Evaluation Requirements 1115 Waiver Renewal

Laura Goodman Medicaid Planning Administration

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Objectives

- Review new evaluation requirements
- Provide an overview of demonstration hypotheses and approach to measurement
- Solicit feedback



HealthChoice Background and History

- HealthChoice, first implemented in 1997 under the authority of Section 1115 of the SSA, is Maryland's statewide mandatory managed care program for Medicaid enrollees.
- The HealthChoice 1115 Waiver is typically renewed every three years; the current waiver term extends for five years (2017-2021).
- The HealthChoice program is a mature demonstration that has been proven to increase access to quality health care and reduce overall healthcare spending.



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HealthChoice Background and History

- In December 2016, CMS approved Maryland's application for a sixth extension of the HealthChoice demonstration.
- This waiver renewal period is particularly focused on developing cost effective services that target the significant, complex health needs of individuals enrolled in Medicaid:
 - 1. Residential Treatment for Individuals with Substance Use Disorders (SUD)
 - 2. Community Health Pilots: Home Visiting Services
 - Community Health Pilots: Assistance in Community Integration Services
 - 4. Dental Services for Former Foster Care Individuals
 - 5. Increased Community Services
 - 6. Family Planning



New Reporting Requirements

STC 82: Summative Evaluation Report

The state must submit a draft Summative Evaluation Report for the demonstration's current approval period represented in these STCs within eighteen (18) [months] following the end of the approval period represented by these STCs. The Summative Evaluation Report must include the information in the approved evaluation design.

Draft evaluation design due to CMS by April 21, 2017



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New Reporting Requirements

STC 32: Annual Post-Award Forum

Pursuant to 42 CFR 431.420(c), within six (6) months of the demonstration's implementation, and annually thereafter, the state shall afford the public with an opportunity to provide meaningful comment on the progress of the demonstration. At least thirty (30) days prior to the date of the planned public forum, the state must publish the date, time, and location of the forum in a prominent location on its website with the public forum announcement. Pursuant to 42 CFR 431.420(c), the state must include a summary of the comments and how they have been addressed in the Quarterly Report associated with the quarter in which the forum was held, as well as in its compiled Annual Report.



Hypotheses

Goal 1. The HealthChoice mandatory managed care program will improve access to health care for the Medicaid population

Improved access will be tested in:

- Enrollment: Managed care participation
- Utilization: Accessing care
- Network adequacy: Adequate provider networks
- Special populations: Children in foster care, REM participants, racial and ethnic minorities



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Hypotheses

Goal 2. The HealthChoice program will improve the quality of health services delivered.

Improved quality of care will be tested in:

- Quality of services provided
- Enrollee satisfaction with care



Hypotheses

Goal 3. The HealthChoice program's medical home provision, guided by the MCOs, will encourage HealthChoice enrollees to access care in appropriate settings and decrease potentially avoidable utilization of health services.

Medical home utilization and success will be tested in:

- Utilization of primary care services
- Utilization of the emergency department for nonemergent issues
- Inpatient admissions for potentially-preventable conditions related to chronic conditions



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Hypotheses

Goal 4. The HealthChoice program will foster health promotion and disease prevention through the provision of preventive services and chronic care.

Increased health promotion and disease prevention will be tested in:

- Utilization of appropriate preventive services, including screenings, immunizations, dental services, antenatal care and reproductive health
- Management of chronic conditions
- Utilization of behavioral health services



Hypotheses

Goal 5. Savings generated by the HealthChoice demonstration will support innovative programs to improve the health and well-being of the Maryland population.

Expanded coverage will be tested through monitoring and evaluation activities related to the following components of the HealthChoice program:

- Residential Treatment for Individuals with SUDs
- Evidence-Based Home Visiting Services Pilots
- Assistance in Community Integration Services Pilots
- Dental Services for Former Foster Care Individuals
- Increased Community Services
- Family Planning Program



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Next Steps

- April 3rd: Feedback on framework of measures
- June 22nd: Post-award forum tentatively scheduled, to follow the June MMAC meeting
- June: Annual HealthChoice evaluation expected, with 2011-2015 data

HealthChoice renewal home page:

https://mmcp.dhmh.maryland.gov/Pages/1115-HealthChoice-Waiver-Renewal.aspx

Contact: laura.goodman@maryland.gov

